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K. SALY EXAMINER FEB 18

COVER LETTER

TQ:

Registration Section

Div	ision of Corporation	ns					
SUBJECT:	Lottus Associates, I	LLC					
30,0000	Name of Limited Liability Company						
		reign Limited Liability Comped to register the above refere					
Please return	n all correspondence o	concerning this matter to the	following:				
	Jeffrey Lewis						
	Name of Person						
	Carnegie Share	ed Services Group, LLC					
		F	irm/Company				
	4955 Steubenv	ille Pike, Suite 115					
		Address					
	Pittsburgh, PA	15205					
		City/S	itate and Zip Code				
	jlewis@carnegie	mgt.com					
	•	E-mail address: (to be use	d for future annual	report not	ification)		
For further in	nformation concernin	g this matter, please call:					
Jef	ffrey Lewis		412 at (275-05	62		
	Name o	of Contact Person	Area Code	Day	time Telephone Number		
Div Reg P.O	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ce, FL 32301		
	a check for the follow \$125.00 Filing Fee	ing amount: \$\Bigsize \text{\$130.00 Filing Fee & Certificate of Status}\$	S155.00 Filir Certified Copy	ig Fee &	\$160.00 Filing Fee, Co of Status & Certified Cop		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 605 0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LABILITY.

Loftus Associates, LLC (Name of Fore		o "Limited Liability Company," "L.L.C.," or "LLC."	
If name unavailable, enter al	ternate name adopted for the purpose of tran	sacting business in Florida. The alternate name must	include "Limited
Pennsylvania	3.	81-0564429	
	of which foreign limited liability	(FEI number, if applicable)	
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F	orida, if prior to registration.) .S. to determine penalty liability)	
300 Bilmar Drive, Suit	e 250	90	2016FEB 16
D'unit out DA 16006			
Pittsburgh, PA 15205	(Street Address of Principa	- EC	
4955 Steubenville Pike,	•	Conice)	
			935
Pittsburgh, PA 15205			#: 06
	(Mailing Address) 	鲁 6
Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)	umi v gs
Name:	InCorp Services, Inc.		
Office Address:	17888 67th Court North		
Office riddress.	Loxahatchee		
	(City)	, Florida (Zip code)	
rsignated in this applicat complywith the provision	gistered agent and to accept service of j tion, I hereby accept the appointment a	process for the above stated limited liability con a registered agent and agree to act in this capacand complete performance of my duties, and I good Jackle DeFilippis on behalf of incomplete signature)	city. I further agre om familiar with c
. The name, title or capa	city and address of the person(s) who ha	s/have authority to manage is/are:	
atrick Branch, President			
ohn Reese, Vice Presiden	t		
effrey Lewis, Controller			<u> </u>
Attached is a certificate risdiction under the law of the translator must be su	of which it is organized. (If the certificat	duly authenticated by the official having custody to is in a foreign language, a translation of the cer	of records in the tificate under oath

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Jeffrey Lewis, Contoller

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 01/22/2016



TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

LOFTUS ASSOCIATES, LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC160122141393-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx